



State of Washington  
Application for a Water Right Permit

☒ SURFACE WATER ☐ GROUND WATER  
☒ Permanent ☐ Temporary ☐ Short Term

For Ecology Use  
(Date Stamp)

RECEIVED

FEB 03 2009

Washington State  
Department of Ecology

Follow the attached instructions. Attach additional sheets as necessary.

A NON-REFUNDABLE MINIMUM FEE OF \$50.00 PAYABLE TO  
THE DEPARTMENT OF ECOLOGY MUST ACCOMPANY THIS APPLICATION.

Section 1. APPLICANT

Applicant/Business Name: <u>Mike Flockstrom</u>	Phone No: <u>360 533 6965</u>	Other No: <u>360 580 8040</u>
Address: <u>2420 Simpson Ave</u>		
City: <u>Hoquiam Wash</u>	State: <u>Wash</u>	Zip: <u>98550</u>
Email Address (optional):		

Contact Name (if different from above):	Phone No:	Other No:
Relationship to Applicant:		
Address:		
City:	State:	Zip:
Email Address (optional):		

Section 2. STATEMENT OF INTENT

Briefly describe the purpose of your proposed project: pump water from unknown Creek Behind Barn for Emergency stock use

Anticipated length of time to complete your project: 2 yrs

**Water Use** List all purposes for which water will be applied to a beneficial use and list quantity required for each.

Purpose(s) of Use	Rate (check one box only) <input type="checkbox"/> Cubic Feet per Second (CFS) <input checked="" type="checkbox"/> Gallons per Minute (GPM)	Acre-Feet per Year (AF/YR) (If known)	Period of Use (Continuously or Seasonal)
Stock water 35 horses Approx.	20 GPM	0.04 CFS	Emergency Back up YR Around
TOTAL:			

Short Term/Temporary Water Use

Is this a request for a short term project (less than four months and non-recurring)? ☐ YES ☒ NO

Is this request for a temporary permit? ☐ YES ☒ NO

If yes to either question above, indicate the dates that the water will be needed:

FROM: \_\_\_/\_\_\_/\_\_\_ TO: \_\_\_/\_\_\_/\_\_\_

For Ecology Use	APPLICATION NO: <u>52-30503</u>	SEPA: Exempt/Not Exempt
	Fee Paid: _____ Check No: _____	ECY Coding: 001-001-WR1-0285-000011
Date Returned	By	Priority Date <u>2/3/09</u> By <u>SL</u> WRIA: <u>22</u>



### Section 3. POINT OF DIVERSION OR WITHDRAWAL

Complete A or B, and C below

<b>A.) If Surface Water Source</b>				<b>B.) If Ground Water Source</b>			
<input type="checkbox"/> Spring <input checked="" type="checkbox"/> Creek <input type="checkbox"/> River <input type="checkbox"/> Lake <input type="checkbox"/> Other: _____				<input type="checkbox"/> Well(s) <input type="checkbox"/> Other: _____			
Source Name: <u>unnamed creek</u>				Well diameter & depth: _____			
Tributary to: <u>BEAR CREEK</u>				Number of proposed points of withdrawal: _____			
Number of proposed diversion points: _____				Do you have an existing well? <input type="checkbox"/> YES <input type="checkbox"/> NO			
Do you have an existing diversion? <input type="checkbox"/> YES <input type="checkbox"/> NO				If available, attach Water Well Report and pump test.			
				Well Tag ID No. _____			
<b>C.) Point of Diversion/Withdrawal – Legal Description</b>							
Parcel No.	¼	¼	Section	Township	Range	County	
	NW	SE	34	18	9W		
Lot(s)	Block(s)		Subdivision				
<u>TRACT M OF ALDER GROVE</u>							
If known, enter the distances in feet from the point of diversion or withdrawal to the nearest section corner: _____ Feet ( <input type="checkbox"/> North/ <input type="checkbox"/> South) and _____ feet ( <input type="checkbox"/> East/ <input type="checkbox"/> West) from the ( <input type="checkbox"/> NW <input type="checkbox"/> SW <input type="checkbox"/> NE <input type="checkbox"/> SE <input type="checkbox"/> ) corner of Section _____.							
Parcel No.	¼	¼	Section	Township	Range	County	
Lot(s)	Block(s)		Subdivision				
If known, enter the distances in feet from the point of diversion or withdrawal to the nearest section corner: <u>150</u> feet ( <input type="checkbox"/> North/ <input checked="" type="checkbox"/> South) and <u>100</u> feet ( <input checked="" type="checkbox"/> East/ <input type="checkbox"/> West) from the ( <input type="checkbox"/> NW <input type="checkbox"/> SW <input type="checkbox"/> NE <input type="checkbox"/> SE <input type="checkbox"/> ) corner of Section _____ <u>CENTER OF SECTION 34</u>							

NOTE: If more than two points of diversion/withdrawal attach additional information on a separate sheet of paper.

Do you own the land on which the proposed point of diversion/withdrawal is located? ☒ YES ☐ NO  
If no, do you have legal authority to make this application for use of another's land? ☐ YES ☐ NO  
Provide the owner name(s), address, and phone number: \_\_\_\_\_

### Section 4. PLACE OF USE

Attach a copy of the legal description of the property (on which the water will be used) taken from a real estate contract, property deed or title insurance policy, or copy it carefully in the space below.

South Portion of TRACT 1 of BEAR CREEK GARDENS						
TRACTS C & M OF ALDER GROVE TRACTS						
¼	¼	Section	Twp.	Range	County	Parcel No.
SW NE NW SE		34	18	9W	GRAYS HARBOR	

Do you own all the lands on which the proposed place of use is located? ☒ YES ☐ NO.

If no, do you have legal authority to make this application for use of another's land? ☐ YES ☐ NO  
Provide owner name(s), address, and phone number: \_\_\_\_\_

Are there any other water rights or claims associated with this property or water system? ☒ YES ☐ NO

If yes, provide the water right and/or claim numbers: 52-#10369CWR15/old CERT.# 4437

Attach a map of your project showing the point of diversion/withdrawal and place of use. If platted property, be sure to include a complete copy of the plat map.



## Section 5. WATER SYSTEM DESCRIPTION

Describe your proposed water system (include type and size of devices used to divert or withdraw water from source):

Electric pump with 80 gallon pressure TANK  
INTAKE in creek 1 1/2" PCV w/ SAND NOZEL to  
PRESSURE TANK system to existing interior  
PIPING within BARN.

## Section 6. DOMESTIC WATER SUPPLY SYSTEM INFORMATION

Complete A or B, and C below

A.) Domestic Water Systems only	B.) Municipal Water Systems only (defined under RCW 90.03.015)
Projected number of connections to be served: _____	Present population to be served water: _____
Type of connections: _____ (e.g., home, recreational cabin)	Estimate future population to be served: _____ (20 year projection)
<b>C.) Water System Planning</b>	
Do you have a Water System Plan approved by the Washington State Department of Health, Drinking Water Division? <input type="checkbox"/> YES <input type="checkbox"/> NO	
If yes, date plan was approved ____/____/____ Water System Number: _____	
Name of water system: _____	
Are you within the service area of an existing water system? <input type="checkbox"/> YES <input type="checkbox"/> NO	
If yes, explain why you are unable to connect to the system: _____	
_____	
_____	
_____	

## Section 7. IRRIGATION/STOCKWATER/OTHER FARM USES

### Irrigation

Total number of acres requested to be irrigated under this application = \_\_\_\_\_ ACRES

NOTE: Outline the area to be irrigated on your attached map.

### Stockwater

List number and kind of stock: 35 horses / Boarding

Is the proposed project for a dairy farm? ☐ YES ☒ NO

### Other Proposed Farm Uses

Describe all proposed uses: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_



**Family Farm Water Act (RCW 90.66):**

Calculate the acreage in which you have a controlling interest, including only:

- Acreage irrigated under water rights acquired after December 8, 1977,
- Acreage proposed to be irrigated under this application, and
- Acreage proposed to be irrigated under other pending application(s).

Is the combined acreage under existing rights greater than 6000 acres? ☐ YES ☐ NO

Do you have a controlling interest in a Family Farm Development Permit? ☐ YES ☐ NO

If yes, enter Permit No: \_\_\_\_\_

**Section 8. OTHER WATER USES**

**Hydropower**

Indicate total feet of head \_\_\_\_\_ and proposed capacity in kilowatts: \_\_\_\_\_

Describe works: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Indicate all uses to which power is to be applied: \_\_\_\_\_

FERC License No: \_\_\_\_\_

**Mining/Industrial Use**

Describe use, method of supplying and utilizing water: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Other Use**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Section 9. WATER STORAGE**

Will you be using a dam, dike, or other structure to retain or store water? ☐ YES ☐ NO

Are you proposing to store more than 10 acre-feet of water? ☐ YES ☐ NO

Will the water depth be 10 feet or more? ☐ YES ☐ NO

If you answered yes to any of the above questions, please describe: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

*NOTE: If you will be storing 10 acre-feet or more of water and/or if the water depth will be 10 feet or more at the deepest point and some portion of the storage will be above grade, you must also complete an Application for Permit to Construct a Reservoir and a Dam Construction Permit and Application.*

**Section 10. DRIVING DIRECTIONS**

Provide detailed driving directions to the project site: Hwy 101 to Hwy 12 to  
Aberdeen, Right after Wishka bridge @ Stop  
Light turn Right onto Market - go over Wishka RV  
bridge - Now on Young St - past Fern Hill Cemetery -  
Follow along RV - Turn Right on Bear Gulch Rd -  
Site Address: 140 Bear Gulch - BARN site.



## Section 11. REQUIRED SIGNATURES

I certify that the information provided in this application is true and accurate to the best of my knowledge. I understand that in order to process my application, I grant staff from the Department of Ecology access to the site for inspection and monitoring purposes. Even though the employees of the Department of Ecology may have assisted me in the preparation of the above application, all responsibility for the accuracy of the information rests with me, the applicant.

Michael Flodstrom

Print Name  
(Applicant or authorized representative)

Michael J Flodstrom

Signature

2/3/09  
Date

Michael Flodstrom

Print Name  
(Landowner of Place of Use)

Michael J Flodstrom

Signature

2/3/09  
Date

\_\_\_\_\_  
Print Name  
(Landowner of Place of Use)

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Print Name  
(Landowner of Place of Use)

\_\_\_\_\_  
Signature

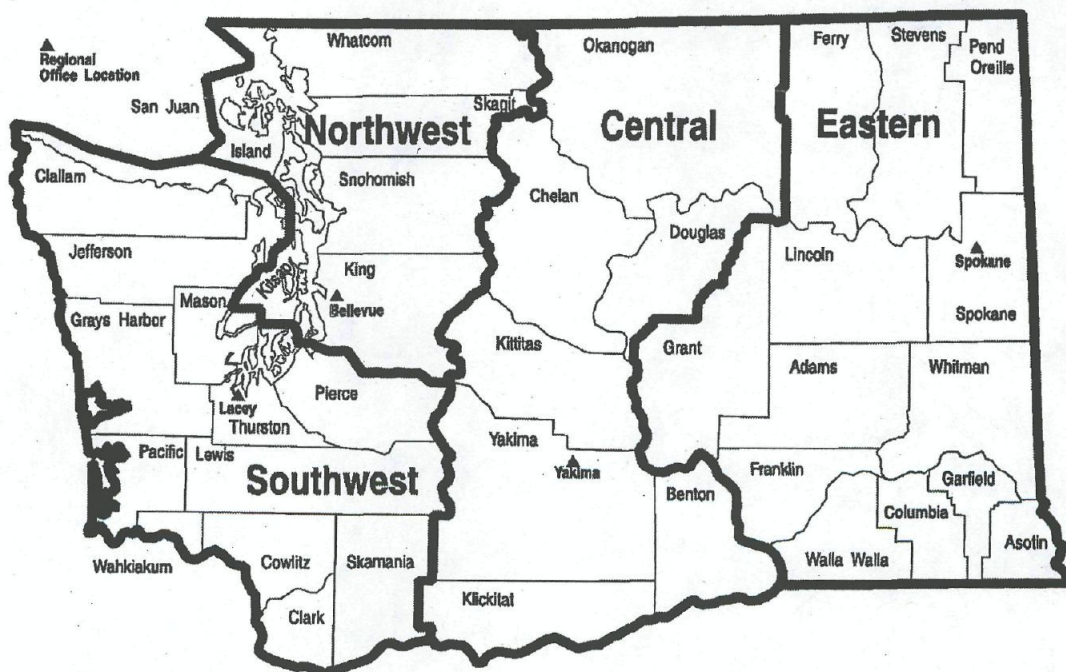
\_\_\_\_\_  
Date

**Submit your application to:** DEPARTMENT OF ECOLOGY  
CASHIERING SECTION  
PO BOX 5128  
LACEY WA 98509-5128

Please check the region in which your proposed project is located.

☐ Southwest ☐ Northwest ☐ Central ☐ Eastern

Below is a map of the State of Washington, with outlines of the four Ecology regional offices. If you have questions about your application, contact the Water Resources program at the regional office in which your project is located.



**Southwest Regional Office:** 360-407-6300

**Northwest Regional Office:** 425-649-7000

**Central Regional Office:** 509-575-2490

**Eastern Regional Office:** 509-329-3400

If you need this document in an alternate format, please call the Water Resources Program at 360-407-6600. Persons with hearing loss can call 711 for Washington Relay Service. Persons with a speech disability can call 877-833-6341